BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents *will not* correct images, please do not report the images to the Image Problem Mailbox.

In the Claims

1. (currently amended) An endovascular apparatus for developing an inflammatory response in a body cavity with cellular manipulation comprising:

a separable implant comprised at least in part of at least one biocompatible and bioabsorbable polymer to cause permanent blockage of flow of blood in the body cavity by inducing the formation of scar tissue therein; and

an endovascular placement device associated with said separable implant adapted to dispose said implant into said body cavity.

2. - 6. (cancelled)

7. (currently amended) The apparatus of claim 1 wherein said biocompatible and bioabsorbable polymer is at least one polymer selected from the group consisting of ~~polyglycolic acid,~~ poly~glycolic acid/poly-L-lactic acid copolymers, polycaprolactive, polyhydroxybutyrate/hydroxyvalerate copolymers, poly-L-lactide, and polydioxanone~~, polycarbonates, and polyanhydrides~~.

8. (currently amended) The apparatus of claim 1 ~~2~~ wherein said biocompatible and bioabsorbable protein is at least one protein selected from the group consisting of fibrinogen, fibronectin, vitronectin, and laminin~~, and gelatin~~.

9. - 10. (cancelled)

11. (original) The apparatus of claim 1 wherein said biocompatible and bioabsorbable polymer promotes cellular manipulation, controlled inflammatory response and vascular healing.

12. (currently amended) A method for creating an inflammatory response in a body cavity comprising:

causing permanent blockage of flow of blood in the body cavity by inducing the formation of scar tissue therein by providing a separable implant having a form and comprised at least in part of at least one biocompatible and bioabsorbable polymer; and

disposing said separable implant into said body cavity.

13. (original) The method of claim 12 further providing said implant with a noncollagenous protein.

14. (original) The method of claim 12 further providing said implant with a growth factor.

15. (original) The method of claim 14 wherein providing said implant with a growth factor comprises providing said implant with a vascular endothelial growth factor.

16. (original) The method of claim 14 wherein providing said implant with a growth factor comprises providing said implant with a basic fibroblast growth factor.

17. (cancelled)

18. (original) The method of claim 12 wherein providing said separable implant comprised with said biocompatible and bioabsorbable polymer comprises providing said implant with at least one polymer selected from the group consisting of polyglycolic acid, poly~glycolic acid/poly-L-lactic acid copolymers, polycaprolactive, polyhydroxybutyrate/hydroxyvalerate copolymers, poly-L-lactide, polydioxanone, polycarbonates, and polyanhydrides.

19. (original) The method of claim 13 wherein providing said separable implant comprised with said biocompatible and bioabsorbable protein

comprising providing at least one protein selected from the group consisting of fibrinogen, fibronectin, vitronectin, laminin, and gelatin.

20. – 21.

22. (original) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer does not elicit intense chronic foreign body reaction.

23. - 24. (cancelled)

25. (original) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer has a selected composition to provide a controlled degradation time to thereby control intravascular inflammatory reactions.

26. (original) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer regenerates tissue through the interaction of immunologic cells.

27. (original) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer stimulates cellular infiltration and proliferation in the process of degradation to accelerate fibrosis.

28. (original) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer accelerates fibrosis within an aneurysm to more strongly anchor said implant than does metal coils.

29. (original) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer is characterized by generating more connective tissue and a less unorganized clot than metal coils so that an aneurysm in which said implant is disposed is more resistant to a water hammer effect of pulsatile blood than when treated by metal coils.

30. (currently amended) The apparatus of claim 1 where the implant comprises a coil and where said biocompatible and bioabsorbable polymer restricts compaction of the coil ~~coil compaction~~ by accelerated scar formation.

31. (original) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer restricts aneurysm recanalization by accelerated scar formation.

32. (original) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer induces organized connective tissue to fill an aneurysm and to retract said aneurysm over time due to maturation of

collagen fibers to reduce aneurysm size and decrease aneurysm compression on brain parenchyma or cranial nerves.

33. (original) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer is less thrombogenic than metal coils and accelerates aneurysm healing with less thrombogenicity.

34. (currently amended) The apparatus of claim 1 where said biocompatible and bioabsorbable polymer comprises a mixture of polyglycolic/ poly-L-lactic acid copolymers with a 90/10 molar ratio of glycolic to L-lactic acid <u>to control the degree of inflammatory response</u>.

35. (original) The apparatus of claim 1 where said implant is a hybrid bioactive coil.

36. (original) The apparatus of claim 35 where said hybrid bioactive coil is a composite of said biocompatible and bioabsorbable polymer and an inert biocompatible coil.

37. (original) The apparatus of claim 36 where said inert biocompatible coil is a platinum coil.

38. (original) The apparatus of claim 36 where said composite of said biocompatible and bioabsorbable polymer and an inert biocompatible coil comprises a layer of said biocompatible and bioabsorbable polymer on said inert biocompatible coil.

39. (original) The apparatus of claim 36 where said composite of said biocompatible and bioabsorbable polymer and an inert biocompatible coil comprises threads of said biocompatible and bioabsorbable polymer attached to said inert biocompatible coil.

A11 cont

40. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises disposing the implant at an implantation site and gradually absorbing the biocompatible and bioabsorbable polymer without leaving residua in the implantation site.

41. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises degrading the biocompatible and bioabsorbable polymer faster than by implanted metal coils and providing a stronger inflammatory reaction than metal coils.

42. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises controlling the degradation

time to thereby control intravascular inflammatory reactions by selection of the composition of the biocompatible and bioabsorbable polymer.

43. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises regenerating tissue through the interaction of immunologic cells by means of the biocompatible and bioabsorbable polymer.

44. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises stimulating cellular infiltration and proliferation in the process of degradation to accelerate fibrosis by means of the biocompatible and bioabsorbable polymer.

45. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises accelerating fibrosis within an aneurysm to more strongly anchor the implant than accomplished metal coils by means of the biocompatible and bioabsorbable polymer.

46. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises generating more connective tissue and a less unorganized clot than metal coils so that an aneurysm in which the implant is disposed is more resistant to a water hammer

effect of pulsatile blood than when treated by metal coils by means of the biocompatible and bioabsorbable polymer.

47. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises restricting compaction of coils implanted into the body cavity by accelerating scar formation the by means of the biocompatible and bioabsorbable polymer.

48. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises restricting aneurysm recanalization by accelerating scar formation by means of the biocompatible and bioabsorbable polymer.

49. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises inducing organized connective tissue to fill an aneurysm and to retract the aneurysm over time due to maturation of collagen fibers by reducing aneurysm size and decrease aneurysm compression on brain parenchyma or cranial nerves by means of the biocompatible and bioabsorbable polymer.

50. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises accelerating aneurysm

healing with less thrombogenicity by means of the biocompatible and bioabsorbable polymer which is less thrombogenic than metal coils.

51. (new) The method of claim 12 where causing permanent blockage of flow of blood in the body cavity comprises providing an implant made from a mixture of polyglycolic/ poly-L-lactic acid copolymers with a 90/120 molar ratio of glycolic to L-lactic acid.